U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

For Official USE ONLY READ THE INSTRUCTIONS CAREFUL READ THE INSTRUCTIONS CAREFUL READ THE INSTRUCTIONS CAREFUL	LLY BEFORE PREPARING THIS REPORT.
1. File Number U - 1/2/1/2	2. Fiscal Year Covered From:
	1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Jeanette L Howell	Name IRON WORKERS AFL-CIO
	Labor Organization File Number 000-052
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any
Street 1750 New York Avenue, N.W.	Street 1750 New York Avenue, N.W.
City Washington	City Washington
State District of Columbia ZIP Code + 4 20006	State District of Columbia ZIP Code + 4 20006
5. Position in labor organization. Executive Secretary	
	usions set forth in the instructions):
 A. Held an interest in, engaged in transactions (including loans) with, or monetary value from an employer whose employees your organizati 	on represents or is actively seeking to represent.
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name	The contraction of the contracti
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	7.b. Amount.
Street	C.D. Pariount.
City (
State ZIP Code + 4	With the think of a control of a property of the control of the co

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

202-383-4811

Telephone Number

Name of Person Filing Jeanette Howell	File Number U-		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
8. Name and address of Business (including trade name, if any).	9. Business deals with:		
Name The McLaughlin Company			
Trade Name, if any:	a. Labor Organization b. Trust		
P.O. Box, Bldg., Room No., if any	c. Employer		
Street 1725 DeSales Street, NW	Gray-mil		
City Washington			
State District of Columbia ZIP Code + 4 20036			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name	McLaughlin is the insurance agent Workers' insurance policies	for various Iron	
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street	11.b. Approximate dollar value of such dealing.	\$361,353	
City	12.a. Nature of interest held or income received.	To detail the label and details of the control of t	
State ZIP Code + 4	5/13/04 - Dinner Meeting		
	12.b. Amount.	shift-out-2 care of out-of-the control out-of-the c	
C. Received from any employer (other than an employer covered under from any labor relations consultant to an employer any payment of money	or other thing of value.	Transmit A transmit and a part of the state	
 Name and address of Employer or Labor Relations Consultant (including trade name, if any). 	14.a. Nature of payment.		
Name		the account of the second of t	
Trade Name, if any:		Committee of the commit	
P.O. Box, Bldg., Room No., if any		Workship of the Control of the Contr	
Street		er entre disserva	
City		PACTE AND	
State		ALACAMANA	
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.		

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name IMPACT	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 1750 New York Avenue, NW, NW Lobby	c. Employer	
City Washington		
State District of Columbia ZIP Code + 4 20006		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	gramau yangunga kontropokantak kegenang yanungay usayundu kon seperjah un 2,25 espekundahan yang ung
Name	Receives contributions from Employers who have collective bargaining contracts with local unic \$4,519,541. IMPACT leases office space & employers	
Trade Name, if any:	from Iron Workers-\$1,057,284	
P.O. Box, Bldg., Room No., if any		100000000000000000000000000000000000000
Street		armount applicable.
City	The state of the s	Mantanian in many statement loss i triber protein incompression of security
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$5,576,285
	12.a. Nature of interest held or income received.	
	06/16/04 - New Orleans RAB - Food	and Drinks
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	***	A VALLE OF TERMOOFT WITH
·		e de la companya de l
	12.b. Amount.	\$123

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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name IMPACT Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 1750 New York Avenue, NW, NW Lobby City Washington State District of Columbia ZIP Code + 4 20006	a. Labor Organization b. Trust c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City	Receives contributions from Employ collective bargaining contracts wi \$4,519,541. IMPACT leases office from Iron Workers-\$1,057,284	th local unions -
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$5,576,285
hander the state of the state o	12.a. Nature of interest held or income received.	Q3,370,203
	06/02/04 - Atlantic City RAB - Foo	d and Drinks
	12.b. Amount.	\$99

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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name IMPACT	a. Labor Organization	
Trade Name, if any:	politicary	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 1750 New York Avenue, NW, NW Lobby	c. Employer	
City Washington		
State District of Columbia ZIP Code + 4 20006		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	magnetischen wie einer zusch zu zu der zu zu bezeinde der mehre zu eine mehre zu der der der der der der der de
Name	Receives contributions from Employers who have collective bargaining contracts with local union \$4,519,541. IMPACT leases office space & employ	
Trade Name, if any:	from Iron Workers-\$1,057,284	-
P.O. Box, Bldg., Room No., if any		
Street		
City International Contract Co		
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$5,576,285
·	12.a. Nature of interest held or income received.	не (or extracted to 2000 и нАх Мей эттэмд ХАД I и тэхэгэхлэлжий га хүлжийн хү гэлжийн уусын хүү
	04/21/04 - St. Louis RAB - Food an	d Drinks
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	And the state of t	that I will be that the continue of the contin
	12.b. Amount.	\$99

Name of Person Filing Jeanette Howell	File Number U-

Name and address of Business (including trade name, if any).	9. Business deals with:	
Name National Erectors Association/Segalco Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 1501 Lee Highway, Suite 202, City Arlington State Virginia ZIP Code + 4 22209-1104	a. Labor Organization b. Trust c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City	National Erectors Association- an interest and concrn about the consindustry. No monetary dealings wi Segalco - Firm that performs servi pension plans. Monetary dealings listed below.	truction th this assoc. ces for related
State ZIP Code + 4	. 11.b. Approximate dollar value of such dealing.	\$58,660
	12.a. Nature of interest held or income received.	and the second s
	5/11/04 - Reception	The section is the section of the se
	12.b. Amount.	\$156

lame of Person Filing Jeanette Howell File Nu	Number U-

8. Name and address of Business (including trade nam	e, if any). 9. B	Business deals with:	
Name Natl Council Erectors Fabricator Trade Name, if any: NCEFR P.O. Box, Bldg., Room No., if any		a. Labor Organization b. Trust	
Street 10382 Main Street		c. Employer	
City Fairfax	a month of forms on a world to consider the constraint of constraints of constrai		
State Virginia ZIP Code + 4	22030		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.8	a. Nature of such dealing.	general processing a comparable processing and the contract of
Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City		sociation with interest & concernative concernative industry	n about the
State ZIP Code + 4	11.b	o. Approximate dollar value of such dealing.	
·	[[[]]	a. Nature of interest held or income received.	Person a form for \$1 miles \$2 miles \$2 May flow on \$100 miles \$100 miles \$2 miles \$2 miles \$2 miles \$200 miles
	5/1	10/04 - Reception	
	12. b	o. Amount.	\$90

Name of Person Filing Jeanette Howell			File Number U-	

Name and address of Business (including trade name, if any).	9. Business deals with:	
Name IMPACT	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 1750 New York Avenue, NW, NW Lobby	c. Employer	
City Washington		
State District of Columbia ZIP Code + 4 20006		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	Notice of Annual Control of State (Annual Annual Annual Annual Annual Annual Annual Annual Annual Annual Annua
Name	Receives contributions from Employers who have collective bargaining contracts with local unions	
Trade Name, if any:	\$4,519,541. IMPACT leases office from Iron Workers-\$1,057,284	pace & employees
P.O. Box, Bldg., Room No., if any		
Street		or Maria Take (1972)
City	The second of th	e district timbrid da en dissensi i two and an elementar a consumer and account elementario and
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$5,576,285
	12.a. Nature of interest held or income received.	het dig ZA johndadomindido, oraz konomo a rassassa a saronana konomana apostosa a kusumonomonomo.
	4/20/04 Dinner Meeting in St. Loui	5
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		sicy wyspowan (**)
	G	annove and a managed
		Temporus and Tempo
	The state of the s	· ·
	12.b. Amount.	\$113

Name of Person Filing Jeanette Howell	File Number U-
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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name IMPACT Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 1750 New York Avenue, NW, NW Lobby City Washington	a. Labor Organization b. Trust c. Employer	
State District of Columbia ZIP Code + 4 20006	11.a. Nature of such dealing.	PERAPPELIA
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City	Receives contributions from Employ collective bargaining contracts wi \$4,519,541. IMPACT leases office from Iron Workers-\$1,057,284	th local unions -
State	11.b. Approximate dollar value of such dealing.	\$5,576,285
"	12.a. Nature of interest held or income received.	Company to the second Acad majority of Japan A manifer (Acad Second Seco
	4/21/04 Dinner Meeting in St. Loui	S
	12.b. Amount.	\$109

Name of Person Filing Jeanette Howell	File Number U -	

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Mosaic	Service Servic	
Trade Name, if any:	a. Labor Organization	
P.O. Box, Bldg., Room No., if any	b. Trust	
Street 4801 Viewpoint Place	c. Employer	
**************************************	Ansamos	
The second of the contract of		
State Maryland ZIP Code + 4 20781	dd a Natura of such dealing	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing. Printing vendor for the Iron Worke	a salawa na kata ya mwaka mamaka zamani maka maka maka maka na kata na kata maka kata kata kata kata kata kat
Name	Fillicing vehicle for the from worke	E 1
Trade Name, if any:	TOTAL PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY	al minimum.
P.O. Box, Bldg., Room No., if any	The state of the s	(Charles or
Street		V. T. T. A.
City	No. of the Control of	AND COLOR
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$654,401
	12.a. Nature of interest held or income received.	manner renew (proper year in an ophiship shakip into also hall manner reneway menor).
	3/26/04 - Luncheon Meeting	22 P2
	TOTAL	Proceedings of the control of the co
	Total Market	Changel a comme
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	12.b. Amount.	\$43